## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

_	Effective January 1, 2003							10623517					
		CLAIMS			ı		SMAL			بدح			
Ī	OTAL CLAIM	IS		(Column 1)		(Column 2)		TYPE [		OF		R THAN L ENTITY	
⊩	OR		11				E	FEE		RATE	FEE		
⊩		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OF	BASIC FE	E 750.00		
		EABLE CLAIMS	11 -	// minus 20=		Ø	X\$ 9	=		OF	X\$18=		
┣—	DEPENDENT					b	X42:		ļ. · · · · · · · · · · · · · · · · · · ·	7	-	<del> </del>	
М	ULTIPLE DEPE	ENDENT CLAIM	PRESENT	RESENT					<del></del>	OF	X04=		
* [	f the differenc	ce in column 1 i	s less than	zero, enter	"0" in	column 2	+140=			OF	+280=		
				MENDED - PART II				L		OR	TOTAL	720	
		(Column 1)	AMENDE	<b></b>			SMALL ENTITY			<b>O</b> D		THAN	
MENDMENT A		CLAIMS REMAINING		HIGHE NUME	EST	(Column 3)		T	ADDI-	OR 7	SMALL	ENTITY	
		AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	RATE		TIONAL FEE		RATE	ADDI- TIONAL FEE	
END	Total	*	Minus -	**		=	X\$ 9=			OR	X\$18=		
AM	Independent	* ENTATION OF N	Minus	Minus *** TIPLE DEPENDENT		=	X42=	7		1	X84=		
	T MOTTIES	ENTATION OF N	IOLITPLE DI	PENDENT	CLAIM		1.0	+		OR			
ı	20	,					+140=			OR	+280=		
•	,7,9	(Column 1)		<b>(0.1</b>			TOTA ADDIT. FE			OR	TOTAL ADDIT. FEE		
m		CLAIMS REMAINING		(Colum	ST	(Column 3)		<del>- , -</del>					
AMENDMENT B		AFTER AMENDMENT		PAID F	JSLY	PRESENT EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=		
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	THOTFRESE	NTATION OF MI	JLTIPLE DE	PENDENT (	CLAIM			╁		OR	X84=		
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		(0.1					TOTAL ADDIT. FEE	L		OR A	TOTAL ADDIT, FEE		
$\overline{\ }$		(Column 1) CLAIMS		(Column	1 2)	(Column 3)							
AWENDINEN! C		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FC	R SLY	PRESENT EXTRA	RATE	TI	DDI- ONAL		RATE	ADDI- TIONAL	
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	Independent	*	Minus	***		=		├-	(	OR	X\$18=		
_1	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT C	LAIM		X42=	_	(	OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **TOTAL ADDIT FOR										OR	+280=		
w*If	the "Highest Nur	mber Previously Pa	id For" IN THIS	SPACE is le	ss than	20, enter "20."	TOTAL ADDIT. FEE	Ĺ_,		OR AC	TOTAL DOIT, FEE		
• •	g., co. radini	ber Previously Paid	ror" (lotal or	Independent)	is the h	ighest number fo	ound in the ap	prop	riate box i	n colur	no 1		